24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 10 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The 2016 Committee	C C00569905
	M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee CAMPAIGN FUNDING DIRECT	Date of Public Distribution/Dissemination
	01 26 2016
Mailing Address 1420 SPRING HILL ROAD, SUITE 490 SUITE 490	Amount
City State Zip Code	295.00
MCLEAN VA 22102-3028	Transaction ID : SE24.91670 Date of Disbursement or Obligation
Purpose of Expenditure AGENCY FEES - CONSULTING Category/ Type 004	01 26 7 2016
Name of Federal Candidate Support	Office Sought: House District:
DR. BEN CARSON Oppose	President Senate State:
Odichadi Todi To Dato	Disbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
CHOCKLETT PRESS	01 26 2016
Mailing Address 2922 NICHOLAS AVE	Amount
City State Zip Code	20956.65
ROANOKE VA 24012	Transaction ID : SE24.91671 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING Category/ Type 004	01 / 26 / Y Y Y Y Y
	Office Sought: House District:
DR. BEN CARSON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought 4979015.07	Disbursement For:
	(
(a) SUBTOTAL of Itemized Independent Expenditures	21251.65
(b) SUBTOTAL of Unitemized Independent Expenditures	·
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Robert Frank [Electronically Filed] Date	04 01 2016
Signature	